

<b>SCC eFile</b>	<b>2012 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION</b>	<b>212524366</b>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME:  <b>THE APPOMATTOX COUNTY ASSEMBLY, INCORPORATED</b></p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:  <b>ROBERT W CARTER JR  PO BOX 878  APPOMATTOX, VA 24522</b></p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE:  <b>APPOMATTOX COUNTY</b></p> <p>4.) STATE OR COUNTRY OF INCORPORATION:  <b>VA</b></p> </div> <div style="width: 35%;"> <p>DUE DATE: <b>6/30/2012</b></p> <p>SCC ID NO: <b>02428993</b></p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED			
CLASS	AUTHORIZED						
<p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="margin-left: 40px;">ADDRESS: GEN DEL P.O. Box 2169</p> <p style="margin-left: 40px;">CITY/ST/ZIP: APPOMATTOX, VA 24522</p>							
<p>7.) DIRECTORS AND PRINCIPAL OFFICERS:      All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>							
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: MILTON L CHAMBERS  TITLE: PRESIDENT  ADDRESS: 661 WILDWAY RD  CITY/ST/ZIP/CO: APPOMATTOX, VA 24522 </td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: top;">OFFICER</td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> </td> <td style="width: 10%; text-align: center; vertical-align: top;">DIRECTOR</td> </tr> </table>			NAME: MILTON L CHAMBERS TITLE: PRESIDENT ADDRESS: 661 WILDWAY RD CITY/ST/ZIP/CO: APPOMATTOX, VA 24522	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: MILTON L CHAMBERS TITLE: PRESIDENT ADDRESS: 661 WILDWAY RD CITY/ST/ZIP/CO: APPOMATTOX, VA 24522	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR			
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: FRANCES CHAMBERS  TITLE: REC SEC  ADDRESS: 661 WILDWAY RD  CITY/ST/ZIP/CO: APPOMATTOX, VA 24522 </td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: top;">OFFICER</td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> </td> <td style="width: 10%; text-align: center; vertical-align: top;">DIRECTOR</td> </tr> </table>			NAME: FRANCES CHAMBERS TITLE: REC SEC ADDRESS: 661 WILDWAY RD CITY/ST/ZIP/CO: APPOMATTOX, VA 24522	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: FRANCES CHAMBERS TITLE: REC SEC ADDRESS: 661 WILDWAY RD CITY/ST/ZIP/CO: APPOMATTOX, VA 24522	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR			
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: WHITNEY ROBINSON  TITLE: FINANCIAL SEC  ADDRESS: 705 MOONLIGHT RD  CITY/ST/ZIP/CO: APPOMATTOX, VA 24522 </td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: top;">OFFICER</td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> </td> <td style="width: 10%; text-align: center; vertical-align: top;">DIRECTOR</td> </tr> </table>			NAME: WHITNEY ROBINSON TITLE: FINANCIAL SEC ADDRESS: 705 MOONLIGHT RD CITY/ST/ZIP/CO: APPOMATTOX, VA 24522	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: WHITNEY ROBINSON TITLE: FINANCIAL SEC ADDRESS: 705 MOONLIGHT RD CITY/ST/ZIP/CO: APPOMATTOX, VA 24522	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR			
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: HARRY BLAIR, SR.  TITLE: TREASURER  ADDRESS: 12138 STONEWALL RD  CITY/ST/ZIP/CO: APPOMATTOX, VA 24522 </td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: top;">OFFICER</td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> </td> <td style="width: 10%; text-align: center; vertical-align: top;">DIRECTOR</td> </tr> </table>			NAME: HARRY BLAIR, SR. TITLE: TREASURER ADDRESS: 12138 STONEWALL RD CITY/ST/ZIP/CO: APPOMATTOX, VA 24522	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: HARRY BLAIR, SR. TITLE: TREASURER ADDRESS: 12138 STONEWALL RD CITY/ST/ZIP/CO: APPOMATTOX, VA 24522	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR			
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: MARY P WOOD  TITLE: ASST SECRETARY  ADDRESS: 5993 OLD COURTHOUSE RD  CITY/ST/ZIP/CO: APPOMATTOX, VA 24522 </td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: top;">OFFICER</td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> </td> <td style="width: 10%; text-align: center; vertical-align: top;">DIRECTOR</td> </tr> </table>			NAME: MARY P WOOD TITLE: ASST SECRETARY ADDRESS: 5993 OLD COURTHOUSE RD CITY/ST/ZIP/CO: APPOMATTOX, VA 24522	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: MARY P WOOD TITLE: ASST SECRETARY ADDRESS: 5993 OLD COURTHOUSE RD CITY/ST/ZIP/CO: APPOMATTOX, VA 24522	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR			
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: Jacqueline Blair  TITLE: Board Chairman  ADDRESS: 12138 Stonewall Rd.  CITY/ST/ZIP/CO: Appomattox, VA 24522 </td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: top;">OFFICER</td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> </td> <td style="width: 10%; text-align: center; vertical-align: top;">DIRECTOR</td> </tr> </table>			NAME: Jacqueline Blair TITLE: Board Chairman ADDRESS: 12138 Stonewall Rd. CITY/ST/ZIP/CO: Appomattox, VA 24522	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: Jacqueline Blair TITLE: Board Chairman ADDRESS: 12138 Stonewall Rd. CITY/ST/ZIP/CO: Appomattox, VA 24522	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR			

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Del Chambers Chair, Ways & M 2275 Watt Abbitt Rd. Appomattox, VA 24522	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Norman Chambers DIRECTOR 2275 Watt Abbitt Rd. Appomattox, VA 24522	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Odell Chambers Chaplin 3552 Forest Chapel Rd. Pamplin, VA 23958	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Sean Chambers Speaker 661 Wildway Rd. Appomattox, VA 24522	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Mary Robinson Historian 705Moonlight Rd. Appomattox, VA 24522	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	J. McKinley Tanner Bus. Advisor 3051 Richmond Hwy. Spout Spring, VA 24593	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Sandra Troxler Asst Bus Mgr 903 Phoebe Pond Rd. Concord, VA 24538	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Minerva Venable DIRECTOR 798 Five Forks Rd. Pamplin, VA 23958	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Shirley Wheeler Bus. Manager 394 Gum Branch Rd. Appomattox, VA 24522	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ FRANCES CHAMBERS SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	FRANCES CHAMBERS, REC SEC PRINTED NAME AND CORPORATE TITLE	6/28/2012 DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			